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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/580,003			ing Date 19/2006	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY				HER THAN ALL ENTITY
	FOR	$\neg T$	NUMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1 16(a), (b), or (c))			N/A		N/A			N/A		1	N/A	
SEARCH FEE (37 CFR 1 16(k), (i), or (m))			N/A		N/A			N/A		]	N/A	
EXAMINATION FEE (37 CFR 1, 16(o), (p), or (q))			N/A		N/A		П	N/A		]	N/A	
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =		•		П	x s =		OR	xs =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 =		•		П	X \$ =		1	X \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE she is s	If the specification and dra sheets of paper, the applic is \$250 (\$125 for small ent additional 50 sheets or frac 35 U.S.C. 41(a)(1)(G) and			n size fee due for each thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										]		
* If t	the difference in colu	umn 1 is less tha	r "0" in colum		TOTAL		]	TOTAL				
APPLICATION AS AMENDED – PART II OTHER THA (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL EN												
AMENDMENT	02/28/2011	CLAIMS REMAINING AFTER AMENDMEN	т	HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
ME	Total (37 CFR 1.16(i))	• 17	Minus	20		= 0	П	x s =		OR	X \$52=	0
Ζl	Independent (37 CFR 1.16(h))	•1	Minus	3		= 0	П	X \$ =		OR	X \$220=	0
Μį	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0			
(Column 1) (Column 2) (Column 3)												
		CLAIMS REMAINING AFTER AMENDMEN		HIGHES NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
E.	Total (37 CFR 1,16())	*	Minus				П	× \$ =		OR	x s =	
AMENDMENT	Independent (37 CFR 1 16(h))		Minus	***		-	П	X \$ =		OR	x s =	
Z.	Application Size Fee (37 CFR 1.16(s))						П			1		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))						П			OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

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